FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB Number:	3235-0076
Expires June	30, 2008
Estimated average	e burden
hours per respons	se: 16.00

OMB APPROVAL



FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
'NIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

08052673		
	ment and name has changed, and indicate change.)	
Non-US Equity Managers: Portfolio 3 LLC:	Limited Liability Company Units	
Filing Under (Check box(es) that apply):	Rule 504 □ Rule 505 ☑ Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing Amend		Man, I , and a series
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the iss	suer	JUN 17 PARA
Name of Issuer (check if this is an amenda	nent and name has changed, and indicate change.)	
Non-US Equity Managers: Portfolio 3 LL	.c	Washington, DC
	lumber and Street, City, State Zip Code)	Telephone Number (including And Code)
One New York Plaza, New York, New Yo	rk 10004	(212) 902-1000
Address of Principal Business Operations	(Number and Street, City, State and Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	PROCESS	ED _
Brief Description of Business	IIIN B o 200	10 E
To operate as a private investment fund.	JUN 2 0 200	18 —
	THOMCONDE	ITEDO
Type of Business Organization	THOMSON REL	JIEK2
☐ corporation	☐ limited partnership, already formed	☑ other (please specify):
☐ business trust	☐ limited partnership, to be formed	Limited Liability Company
Actual or Estimated Date of Incorporation or Or	rganization: Month Year 0 4 0 7	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrevia State: CN for Canada; FN for other foreign jur	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA		
2. Enter the information requested for the following:		
* Each promoter of the issuer, if the issuer has been organized within the past five years;		
	more	of a class of equity securities
of the issuer;		
 Each executive officer and director of corporate issuers and of corporate general and managing partner 	s of pa	rtnership issuers; and
* Each general and managing partner of partnership issuers.		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	Ø	General and/or Managing Partner
Full Name (Last name first, if individual)		
Goldman Sachs Asset Management, L.P. (the Issuer's Managing Member)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
One New York Plaza, New York, New York 10004		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner
Full Name (Last name first, if individual)		
Asali, Omar M.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
One New York Plaza, New York, New York 10004		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner
Full Name (Last name first, if individual) Barbetta, Jennifer		
Business or Residence Address (Number and Street, City, State, Zip Code)		
One New York Plaza, New York, New York 10004		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director * of the Issuer's Managing Member	•	General and/or Managing Partner
Full Name (Last name first, if individual)		
Gottlieb, Jason		
Business or Residence Address (Number and Street, City, State, Zip Code)		
One New York Plaza, New York, New York 10004		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner
Full Name (Last name first, if individual)		
Ort, Peter		
Business or Residence Address (Number and Street, City, State, Zip Code)		
One New York Plaza, New York, New York 10004		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner
Full Name (Last name first, if individual)		
Ross, Hugh M.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
One New York Plaza, New York, New York 10004		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director		General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

		-		B. IN	FORMAT	ION ABO	UT OFF	ERING				,
								··-		 -	Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								\square				
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What i	is the minim	num investn	nent that wil	l be accept	ed from any	individual:	,				\$	*
*The Issu	er's Manag	ger may in	its sole disc	retion acce	pt subscrip	tion amou	nts in what	ever amour	it it determ	ines is	Yes	No
acceptable	e.										. 55	
	he offering											_
4. Enter	the informa	tion reques	ted for eac	h person w	ho has bee	n or will b	e paid or g	iven, direct	ly or indire	ctly, any		
commi	ission or sin rson to be li	nnar remun isted is an a	eration for s ssociated pe	erson or age	or purchase int of a brok	er or dealer	registered	with the SE	C and/or wi	th a state		
or state	es, list the n	ame of the	broker or d	ealer. If me	ore than five	e (5) person	s to be liste	d are associ	ated person	s of such		
	er or dealer,			information	for that bro	ker or deal	er only.			<u>.</u>		
Full Name	(Last name	e first, if ind	lividual)									
Goldman,	, Sachs & C	*										
*Although	h the securi	ities will be	sold throu	gh Goldma	ın, Sachs &	Co., no co	mmissions	will be paid	l, directly o	r indirectly	, for solicit	ing any
	r in any jur		· · · · · · · · · · · · · · · · · · ·	Charles Cit	Cana 7im	Cada	_					
Business of	or Residence	e Address (I	Number and	Street, Cit	y, State, Zip	(Code)						
	Street, Nev			004								
Name of A	Associated E	Broker or De	ealer									
	Vhich Perso											U. C
`	All States" o			•								ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS] [OR]	[MO] [PA]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[WY]	[PR]
[RI]	[SC] : (Last name	[SD]	[TN]	[TX]	[01]	[[V 1]	[VA]	[WA]	[""]	[""]	[""]	[, ,,
T dir i variie	(Bust nume	, 1113t, 11 111d	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
Business of	or Residence	Address (1	Number and	Street, City	v. State, Zip	Code)				-		
		(-			,,,	,						
Name of A	Associated B	roker or De	ealer									
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
(Check "	All States" o	or check inc	lividual Stat	es)					••••••			l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	(OK)	[OR]	[PA]
[RI]	[SC] (Last name	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ruii Name	(Last name	e nrst, n ma	ividuai)									
Business of	or Residence	Address (1	Number and	Street, Cit	y, State, Zip	Code)			<u></u>			
		(-			,, , ,	•						
Name of A	Associated B	roker or De	aler	-						 -		
	ID: 1 P	71.11	0.1	T . 1	0.11.1.15	1			<u> </u>			
	Vhich Perso All States" o							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M1]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
ſŖIJ	(SC)	[SD]	ITNI	[TX]	ſUTI	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price		Α	amount Already Sold
	Debt	\$	0	\$		0
	Equity		0	\$		0
	□ Common □ Preferred	_				
	Convertible Securities (including warrants)	\$	0	\$		0
	Partnership Interests			\$		0
	Other (Specify): Limited Liability Company Units			\$		219,729,000
	Total			\$		219,729,000
	Answer also in Appendix, Column 3, if filing under ULOE.	_	,,	·		, ,,
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					Accesses
			Number Investors		I	Aggregate Oollar Amount of Purchases
	Accredited Investors	_	366	\$		219,729,000
	Non-accredited Investors	_	0	\$		0
	Total (for filings under Rule 504 only)	_	N/A	\$		N/A
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of		Г	Dollar Amount
	Type of offering		Security		•	Sold
	Rule 505	_	N/A	\$		N/A
	Regulation A	_	N/A	\$		N/A
	Rule 504		N/A	\$		N/A
	Total		N/A	\$		N/A
th th	a. Furnish a statement of all expenses in connection with the issuance and distribution of e securities in this offering. Exclude amounts relating solely to organization expenses of e issuer. The information may be given as subject to future contingencies. If the amount of a expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$		0
	Printing and Engraving Costs			\$	_	<u>0</u>
	Legal Fees		Ø	\$		118,143
	Accounting Fees			\$		0
	Engineering Fees.			\$		0
	Sales Commissions (specify finders' fees separately)		ū	\$		0
	Other Expenses (identify)			\$		0
	Total		፟	\$		118,143

C. OFFERING PRICE, NUN	MBER OF INVESTORS, EXI	PENS	ES /	AND USE OF PI	ROCE	EDS	
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."							219,610,857
to be used for each of the purposes shown. If t furnish an estimate and check the box to the payments listed must equal the adjusted gross p to Part C - Question 4.b. above.	the amount for any purpose is not let left of the estimate. The total	known l of the	n, he				
				Payments to Officers, Directors, & Affiliates			Payments To Others
Salaries and Fees			\$_	0	_ 🗆	\$_	0
Purchase of real estate		D	\$	0		\$_	0
Purchase, rental or leasing and installation of ma	achinery and equipment		\$_	0		\$_	0
Construction or leasing of plant buildings and fa	acilities		\$ <u>_</u>	0		\$_	0
Acquisition of other businesses (including the this offering that may be used in exchange the another issuer pursuant to a merger)	for the assets or securities of		\$_	0		\$_	0
Repayment of indebtedness			\$ <u>_</u>	0		\$_	0
Working capital			s _	0		\$ _	0
Other (Specify): Limited Liability Company U			s _	0	- _ Ø	s _	219,610,857
Column Totals			s _	0	- ☑	\$_	219,610,857
Total Payments Listed (column totals added)	10,85	7					
	D. FEDERAL SIGNATUL	RE					
The issuer has duly caused this notice to be sign following signature constitutes an undertaking by of its staff, the information furnished by the issuer t	the issuer to furnish to the U.S. Se	ecuritie	ies and	nd Exchange Comm	nission,	upon	r Rule 505, the written request
issuer (Print or Type) Non-US Equity Managers: Portfolio 3 LLC	Signature //	<u></u>		Date June 16 2008			
Name of Signer (Print or Type) David Kraut	Title of Signer (Print or Type) Assistant Secretary of the Issu	uer's l	Mans	iging Member			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

